

# DECLARATION Utility Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled A SURGICAL RETRACTOR PLATFORM BLADE APPARATUS the specification of which

(Check One) ☒ is attached hereto OR  
☐ was filed on \_\_\_ as United States Application Serial No. \_\_\_\_\_ or PCT  
International Application No. \_\_\_ and was amended on \_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Date of Filing	Priority Claimed	
			Yes	No

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date	Status-Patented, Pending or Abandoned

Send Correspondence to: Kurt T. Mulville	LYON & LYON LLP 633 W Fifth St., Suite 4700 Los Angeles, CA 90071	Direct Telephone calls to: 714/ 751-6606 x 1124
---	---	---

	FULL NAME OF INVENTOR	FIRST Name Lawrence	MIDDLE Initial W.	LAST Name Hu	
201	RESIDENCE & CITIZENSHIP	City Mountain View	State or Foreign Country CA	Country of Citizenship USA	
	POST OFFICE ADDRESS	200 East Dana St., Apt. E109	City Mountain View	State or Country CA	Zip Code 94041
	FULL NAME OF INVENTOR	FIRST Name David	MIDDLE Initial J.	LAST Name Paul	
202	RESIDENCE & CITIZENSHIP	City Scotts Valley	State or Foreign Country CA	Country of Citizenship USA	
	POST OFFICE ADDRESS	885 Cadillac Dr.	City Scotts Valley	State or Country CA	Zip Code 95066
	FULL NAME OF INVENTOR	FIRST Name Eugene	MIDDLE Initial Edward	LAST Name Reis	
203	RESIDENCE & CITIZENSHIP	City San Jose	State or Foreign Country CA	Country of Citizenship USA	
	POST OFFICE ADDRESS	90 Rankin Ave.	City San Jose	State or Country CA	Zip Code 95110
	FULL NAME OF INVENTOR	FIRST Name Harry	MIDDLE Initial Leonard	LAST Name Green II	
204	RESIDENCE & CITIZENSHIP	City Santa Cruz	State or Foreign Country CA	Country of Citizenship USA	
	POST OFFICE ADDRESS	2464 Glen Canyon Rd.	City Santa Cruz	State or Country CA	Zip Code 95066
	FULL NAME OF INVENTOR	FIRST Name	MIDDLE Initial	LAST Name	
205	RESIDENCE & CITIZENSHIP	City	State or Foreign Country	Country of Citizenship	
	POST OFFICE ADDRESS		City	State or Country	Zip Code
	FULL NAME OF INVENTOR	FIRST Name	MIDDLE Initial	LAST Name	
206	RESIDENCE & CITIZENSHIP	City	State or Foreign Country	Country of Citizenship	
	POST OFFICE ADDRESS		City	State or Country	Zip Code

Signature of Inventor	201
Date	4/27/99
Signature of Inventor	202
Date	4/28/99
Signature of Inventor	203
Date	4-27-99

Signature of Inventor	204
Date	2-27-89
Signature of Inventor	205
Date	
Signature of Inventor	206
Date	

OC-25127.1